

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>			

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	1-1	3/12/13
2		✓	6/12/13
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42	✓		
43	N		
44	N		
45	N		
46	N		
47	N		
48	—	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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